5-6-05

	this form, together wi	th annliashi-	Foo(a) + 1	Men	NSMITTAL	र कार क	
MAY 0 5 2005	tnis form, togetner wi	ти аррисавіе і		<u>viaii</u> Fax	Mail Stop ISSUI Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	or Patents	
INSTRUCTIONS: 50 s for appropriate. All terrier coindicated purious corrected	orm should be used for train orrespondence including the below or directed otherwise ons.	nsmitting the ISSI Patent, advance of in Block 1, by (				will be mailed to the curren ; and/or (b) indicating a sep	should be completed whe t correspondence address parate "FEE ADDRESS" f
	CE ADDRESS (Note: Use Block 1 for						
	7590 03/28/2005 FHENNISCH PC PE ST				Fee(s) Transmittal. The papers. Each additions have its own certificate  EV 5544e I hereby certify that the	mailing can only be used a sis certificate cannot be used all paper, such as an assignme of mailing or transmission.	for any other accompanying the formal drawing, must be smission as deposited with the Unit
SUITE 210 PONTIAC, MI 48 2005 CHGUYENI, 000000						70 50 US rifficate of Mailing or Tran his Fee(s) Transmittal is beir with sufficient postage for il Stop ISSUE FEE address TO (703) 746-4000, on the	•
			KONI L.	MASQUELIER	(Depositor's name		
1501 1400.00 OP 1504 300.00 OP			05.05	h. Masqueller	(Signature		
APPLICATION NO.	FILING DATE	Γ	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/635,070 08/06/2003		J	Michael J. Czaplicki		ki	1001-009C2	7212
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400			\$300	\$1700	06/28/2005
EXAMINER		ART UNIT		CI	ASS-SUBCLASS		
		L		L			
JIMENEZ, MA	RC QUEMUEL	3726			029-458000		
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/I:  "Fee Address" indicates	RC QUEMUEL  e address or indication of "For address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use	cee Address" (37  Correspondence	2. For prin (1) the nar or agents ( (2) the nar	nting on the mes of upon the of a si	029-458000  the patent front page, list p to 3 registered patent natively, lingle firm (having as a	t attorneys 1 PC	ISIN & THENN
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	e address or indication of "Fordence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use	ce Address" (37  Correspondence ation form cof a Customer  E PRINTED ON T	2. For prin (1) the nar or agents ( (2) the nar registered 2 registere listed, no r	mes of up OR, altern ne of a si attorney d patent name will	029-458000  the patent front page, list p to 3 registered patentatively, single firm (having as a or agent) and the name attorneys or agents. If it be printed.	t attorneys  PC  member a es of up to no name is 3	
JIMENEZ, MA  I. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND	e address or indication of "Fordence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use	ce Address" (37  Correspondence ation form cof a Customer  E PRINTED ON T	2. For prin (1) the nar or agents ( (2) the nar registered 2 registere listed, no r	mes of up OR, altern ne of a si attorney d patent name will	029-458000  the patent front page, list p to 3 registered patentatively, single firm (having as a or agent) and the name attorneys or agents. If it be printed.	t attorneys  PC  member a es of up to no name is 3	
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	e address or indication of "Formula de la desarration de la desarration (or "Fee Address" Indicator more recent) attached. Use Description (or "Fee Address" Indicator more recent) attached. Use Description de la desarration de l	ce Address" (37  Correspondence ation form e of a Customer  E PRINTED ON Tolow, no assignee of this form is NOT	2. For prin (1) the nan or agents ( (2) the nar registered 2 registered iisted, no r THE PATENT data will app T a substitute	mes of upon the mes of upon alternation attorney distribution of the mes of a significant and the mes of the m	029-458000  the patent front page, list p to 3 registered patentatively, single firm (having as a or agent) and the name attorneys or agents. If it be printed.	member a es of up to no name is 3	
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02.  Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in	e address or indication of "Formula address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use of RESIDENCE DATA TO B.  an assignee is identified be 137 CFR 3.11. Completion of EE	ce Address" (37  Correspondence ation form e of a Customer  E PRINTED ON Tolow, no assignee of this form is NOT	2. For prin (1) the nan or agents ( (2) the nan registered 2 registered listed, no n THE PATENT data will apper r a substitute ) RESIDENC	nting on the mes of upon the mes of upon the mes of a significant of a significant of the mes of a significant of the mes	029-458000  the patent front page, lisp to 3 registered patentatively, single firm (having as a or agent) and the name attorneys or agents. If the printed.  Type)  e patent. If an assigned an assignment.	member a es of up to no name is 3	
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indical PTO/SB/47; Rev 03-02 ( Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI  L & L PROI	e address or indication of "Fordence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use PRESIDENCE DATA TO Be an assignee is identified be 137 CFR 3.11. Completion of EE	ce Address" (37  Correspondence ation form cof a Customer  E PRINTED ON Tolow, no assignee of this form is NOT	2. For prin (1) the nar or agents ( (2) the nar registered 2 registered listed, no remarks (1) the part of a substitute (1) RESIDENC ROMEO	nting on the mes of up OR, alterned a significant of a significant of the mes	029-458000  the patent front page, list p to 3 registered patent natively, ingle firm (having as a or agent) and the name attorneys or agents. If it be printed.  Type)  e patent. If an assigned an assignment.  and STATE OR COUCHIGAN	t attorneys  PC  PC  member a es of up to no name is 3  ee is identified below, the delivery	ocument has been filed fo
JIMENEZ, MA  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1:  Tee Address form PTO/SB/1:  Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE  L & L PROD	e address or indication of "Foreigness and a saignee category or category or category or category assignee category or category assignee category or category and assignee category or category and a sasignee category and a	ce Address" (37  Correspondence ation form e of a Customer  E PRINTED ON Tolow, no assignee of this form is NOTO  (Butter and the control of the control of the customer)  (Butter and the customer)	2. For prin (1) the nan or agents ( (2) the nar registered 2 registered 1 registered 2 registered 1 registered 2 registered 1 registered 2 registered 3 registered 3 RESIDENC ROMEO inted on the pa	nting on the mes of up OR, aftern mes of a single attorney of patent name will for filing the companion of t	029-458000  the patent front page, list p to 3 registered patentatively, ingle firm (having as a or agent) and the name attorneys or agents. If the printed.  Type)  e patent. If an assigned an assignment.  and STATE OR COULT GAN  Individual Coult	t attorneys  PC  PC  member a 2  es of up to no name is 3  es identified below, the description or other private group or other private g	ocument has been filed fo
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicate PTO/SB/47; Rev 03-02 (Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE  L & L PROI	e address or indication of "Foreigness and a sasignee category or categories of UCTS"  assignee category or categories and categories assignee category or categories and c	ce Address" (37  Correspondence ation form e of a Customer  E PRINTED ON To assignee of this form is NOT (B)  ries (will not be printed to the printed to th	2. For prin (1) the nan or agents ( (2) the nar registered 2 registered [isted, no n THE PATENT data will app f a substitute ( ) RESIDENC ROMEO inted on the pa Payment of I A check in	ating on the mes of up OR, alterned of a significant or a	ne patent front page, lis p to 3 registered patent natively, lingle firm (having as a or agent) and the name attorneys or agents. If the printed.  Type)  e patent. If an assignment.  and STATE OR COUCHIGAN  Individual Count of the fee(s) is encount of the fee(s) is encount.	member a es of up to no name is 3	ocument has been filed fo
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicate PTO/SB/47; Rev 03-02 ( Number is required.  B. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI  L & L PROI  Please check the appropriate  a. The following fee(s) are to the correspondence of t	e address or indication of "Formula de la description (or "Fee Address" Indicator more recent) attached. Use of RESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion of EE.  OUGTS  assignee category or category enclosed:	ce Address" (37  Correspondence ation form e of a Customer  E PRINTED ON To elow, no assignee of this form is NOT (B)  ries (will not be printed the p	2. For prin (1) the nan or agents ( (2) the nar registered 2 registered 10 registered 11 registered 12 registered 13 registered 15 red 16 red 16 red 17 registered 18 red 18 red 19 registered 19 registered 10 red	ating on the mes of up OR, alterned of a significant or a	he patent front page, lisp to 3 registered patentatively, lingle firm (having as a or agent) and the name attorneys or agents. If the printed.  Type)  e patent. If an assigned an assignment.  and STATE OR COUCHIGAN  Individual Count of the fee(s) is encount of the fee(s) is encount.	member a es of up to no name is 3	ocument has been filed fo
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indical PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI  L & L PROD  Please check the appropriate  a. The following fee(s) are of Issue Fee  Publication Fee (No si Advance Order - # of  Change in Entity Status of a. Applicant claims SM	e address or indication of "Formula de la description (or "Fee Address" Indicator more recent) attached. Use of RESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion of EE.  OUGTS  assignee category or category enclosed:  mall entity discount permitter of Copies  (from status indicated above) MALL ENTITY status. See 3	cee Address" (37  Correspondence ation form e of a Customer  E PRINTED ON Telow, no assignee of this form is NOT (B)  ries (will not be printed to be printe	2. For prin (1) the nail or agents (2) the nail registered 2 registered 12 registered 2 registered 2 registered 2 registered 2 registered 13 registered 2 registered 15 registered 2 regist	atting on the mes of up OR, aftern mes of a single attorney of patent and ame will for filing the company of th	o29-458000  the patent front page, list p to 3 registered patentatively, ingle firm (having as a or agent) and the name attorneys or agents. If it be printed.  Type)  type)  e patent. If an assigned an assignment.  And STATE OR COULT GAN  Individual Count of the fee(s) is encount of the fee(s) is encount of the fee(s) is encount.  Type out to the fee(s) is encount of t	t attorneys  The property of the provided recognition of the private grounds attached.  The provide	ocument has been filed for pup entity Government credit any overpayment, to this form).
JIMENEZ, MA  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indical PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGNI  L & L PROD  Please check the appropriate In the following fee(s) are of Issue Fee Publication Fee (No si Advance Order - # of  Change in Entity Status (  a. Applicant claims SM	e address or indication of "For dence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use PRESIDENCE DATA TO Be an assignee is identified be 137 CFR 3.11. Completion of EE  OUCTS  assignee category or category enclosed:  mall entity discount permitted Copies  (from status indicated above)	cee Address" (37  Correspondence ation form e of a Customer  E PRINTED ON Telow, no assignee of this form is NOT (B)  ries (will not be printed to be printe	2. For prin (1) the nail or agents (2) the nail registered 2 registered 12 registered 2 registered 2 registered 2 registered 2 registered 13 registered 2 registered 15 registered 2 regist	atting on the mes of up OR, aftern mes of a single attorney of patent and ame will for filing the company of th	o29-458000  the patent front page, list p to 3 registered patentatively, ingle firm (having as a or agent) and the name attorneys or agents. If it be printed.  Type)  type)  e patent. If an assigned an assignment.  And STATE OR COULT GAN  Individual Count of the fee(s) is encount of the fee(s) is encount of the fee(s) is encount.  Type out to the fee(s) is encount of t	t attorneys  The property of the provided recognition of the private grounds attached.  The provide	ocument has been filed for pup entity Government credit any overpayment, to this form).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, No. 100 Commissioner for Patents

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No. \_

Pra&titioner's Docket No. 1001-009C2

**PATENT** 

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

application of:

Michael J. Czaplicki, Eric Le Gall and Berndt Eckman

Application No.: 10/635,070

Group No.: 3726

Filed: 08/06/2003

Examiner: Marc Jimenez

For: HEAT ACTIVATED REINFORCING SLEEVE

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## TRANSMITTAL OF PAYMENT OF ISSUE FEE AND PUBLICATION FEE (37 C.F.R. § 1.311)

- Applicant hereby pays the issue fee and publication fee for the attached Fee(s) Transmittal PTOL-85.
- 2. Fee (37 C.F.R. § 1.18 (a)):

Application status is other than a small entity with a regular fee of \$1,400.00 and a publication fee of \$300.00.

3. Payment of fee:

Attached is a check in the amount of \$1,700.00.

# CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10\*

(When using Express Mail, the Express Mail label number is **mandatory**; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

#### **MAILING**

[x] deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a)

G with sufficient postage as first class mail.

37 C.F.R. § 1.10\*

[x] as "Express Mail Post Office to Addressee" Mailing Label No. EV554439598US

#### **TRANSMISSION**

G facsimile transmitted to the Patent and Trademark Office, (703) \_

Signature

Date: 05.05.05

(type or print name of person certifying)

<sup>\*</sup> Only the date of filing (' 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under ' 1.8 continues to be taken into account in determining timeliness. See ' 1.703(f). Consider "Express Mail Post Office to Addressee" (' 1.10) or facsimile transmission (' 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

Charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 50-1097.

Date: 4 May 2005

Scott A. Chapple

Registration No. 46,287

DOBRUSIN & THENNISCH PC

29 W. Lawrence Street

Suite 210

Pontiac, MI 48342

248-292-2920

Customer No. 25215